Case 16-11229 Doc 1 Filed 03/31/16 Entered 03/31/16 16:59:27 Desc Main Document Page 1 of 47

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
your pictu exar	rite the name that is on our government-issued cture identification (for kample, your driver's	Denise First name	First name	
		nse or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Brown Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-3923	

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Case number (if known)

Debtor 1 Denise Brown

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 12535 S Central Ave, Apt 4 Alsip, IL 60803 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Desc Main

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Document Page 3 of 47 Case number (if known) Debtor 1 Denise Brown

Par	Tell the Court About	our E	Bankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are			rief description of each, see // go to the top of page 1 and cl			C.C. § 342(b) for Individu	uals Filing for Bankruptcy	
	choosing to file under	■ Chapter 7 □ Chapter 11							
		_	hapter 12						
			Chapter 13						
I will pay the entire fee when I file my petition. Please check with the clerk's office in your local about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cash order. If your attorney is submitting your payment on your behalf, your attorney may pay with a cre a pre-printed address.					, cashier's check, or money				
				the fee in installments. If yo	ou choos	e this option, sigr	and attach the Applica	ation for Individuals to Pay	
		_	ū	e Filing Fee in Installments (Official Form 103A).					
			but is not requapplies to you	est that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty to your family size and you are unable to pay the fee in installments). If you choose this option, you must colication to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.					
9.	Have you filed for bankruptcy within the last 8 years?	□ N							
	last o years:	_ '	c s.	NDIL - Chapter 13 -					
			District	Dismissed 1/30/2014	When	12/10/14	Case number	12-48339	
			District	NDIL - Chapter 13 - Dismissed 04/02/2012	When	10/20/09	Case number	09-39255	
			District		_ When		Case number		
10.	Are any bankruptcy	■ N	0						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	\ □ Y							
			Debtor				Relationship to y	ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		_ When		Case number, if	known	
11.	Do you rent your	□N	o. Go to li	ne 12.					
	residence?	■ Y	es. Has yo	ur landlord obtained an eviction	on judgm	ent against you a	and do you want to stay	in your residence?	
				No. Go to line 12.					
			_	Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About a	n Eviction Judgm	ent Against You (Form	101A) and file it with this	

Document Page 4 of 47 Case number (if known) Debtor 1 Denise Brown Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Denise Brown

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Case number (if known)

Part 5:

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 47 Case number (if known) Debtor 1 **Denise Brown** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Denise Brown Signature of Debtor 2 **Denise Brown**

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on March 22, 2016

MM / DD / YYYY

Debtor 1 Denise Brown

Document Page 7 of 47

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Thomas	s W. Lynch	Date	March 22, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Thomas W	/. Lynch			
Law Office	e of Thomas W. Lynch, P.C.			
Firm name				_
9231 S. Ro	berts Road			
Hickory Hi	ills, IL 60457			
Number, Street,	City, State & ZIP Code			
Contact phone	(708) 598-5999	Email address	twlpc@att.net	
6194247				
Day acceptage 0 Co	lata.			

	DOCHM	ent Page 8 of 47	
mation to identify your	case:		
Denise Brown			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Denise Brown First Name First Name	Denise Brown First Name Middle Name First Name Middle Name	Denise Brown First Name Middle Name Last Name First Name Middle Name Last Name

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	23,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	23,400.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	12,734.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	176,373.79
	Your total liabilities	\$	189,107.79
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,206.60
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,205.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Denise Brown _____ Document Page 9 of 47 Case number (if known) _____

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Document	Page 10 of 47		
Fill in this in	formation to identify you	r case and this filing:			
Debtor 1	Denise Brown				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Case number	·				☐ Check if this is an
					·
Official F	Form 106A/B				
Sched	ule A/B: Prop	perty			12/15
hink it fits bes	t. Be as complete and accur more space is needed, attacl	be items. List an asset only once. ate as possible. If two married peo n a separate sheet to this form. On	ple are filing together, both a	are equally responsible for si	upplying correct
Part 1: Descr	ribe Each Residence, Buildin	g, Land, or Other Real Estate You	Own or Have an Interest In		
. Do you own	or have any legal or equitab	le interest in any residence, buildir	ng, land, or similar property?		
No. Go to	Part 2.				
☐ Yes. Whe	ere is the property?				
Part 2: Descr	ribe Your Vehicles				
	•	cle, also report it on Schedule G:	Executory Contracts and L	Jnexpired Leases.	
O.4. Malaa	Chevrolet	Who has an internet in	the meaning of	Do not deduct secured of	laims or exemptions. Put
3.1 Make:	Equinox		the property? Check one	the amount of any secure	ed claims on Schedule D: ims Secured by Property.
Model: Year:	2010	Debtor 1 only			
		Debtor 2 only Debtor 1 and Debtor	2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	At least one of the de		cilino proporty :	portion you crim
		☐ Check if this is com	munity property	\$12,700.00	\$12,700.00
		(See manuchona)			
		ATVs and other recreational vesonal watercraft, fishing vessels,			

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 16-11229 Denise Brown	Doc 1	Filed 03/31/16 Document	Entered 03/31/16 1 Page 11 of 47 Case num	.6:59:27	Desc Main
■ Yes.	Describe				,	
	misc. I	household for furniture		ving room, kitchen and		\$250.00
□No				oment; computers, printers, scar	nners; music c	ollections; electronic devices
	misc h	ousehold e	electronics including	2 televisions		\$50.00
■ No □ Yes.	bles of value fes: Antiques and figurines; other collections, mem Describe ent for sports and hobbie	orabilia, collec		oks, pictures, or other art objects	s; stamp, coin	or baseball card collections;
Example No			other hobby equipment;	bicycles, pool tables, golf clubs,	skis; canoes	and kayaks; carpentry tools;
■ No	ns bles: Pistols, rifles, shotgun Describe	s, ammunitio	n, and related equipmen	t		
□ No	s bles: Everyday clothes, furs Describe	s, leather coat	ts, designer wear, shoes	, accessories		
	persor	nal wearing	apparel			\$300.00
■ No □ Yes. 13. Non-fa Examp		, ,	engagement rings, wed	ding rings, heirloom jewelry, wat	iches, gems, (gold, silver
■ No	her personal and househ	-	ou did not already list, i	ncluding any health aids you o	did not list	
	the dollar value of all of y art 3. Write that number h			ny entries for pages you have	attached	\$600.00
	scribe Your Financial Assets vn or have any legal or ed		rest in any of the follow	ring?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 **Denise Brown** 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$20.00 pocket cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Byline Bank** \$80.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Institution name: Type of account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them...

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	Case 16-11229	Doc 1	Filed 03/31/16 Document	Entered 03/3 Page 13 of 47	1/16 16:59:27	Desc Main
Debtor 1	Denise Brown		Bocament		Case number (if known)	
Exam ■ No	ses, franchises, and othe ples: Building permits, exc	lusive licenses		n holdings, liquor licens	ses, professional licens	es
		about tricini				Comment value of the
woney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	funds owed to you Give specific information	about them, inc	cluding whether you alre	ady filed the returns an	d the tax years	
			income tax refund (\$2195.00) used for living expenses			\$0.00
■ No □ Yes.	y support ples: Past due or lump sun Give specific information amounts someone owes ples: Unpaid wages, disab benefits; unpaid loan	you ility insurance	payments, disability ben			
_	. Give specific information.	-				
	·	money divorc	/ due to Debtor from e order. Ex-husban es this amount to be	d is on social secu		\$10,000.00
Exam ■ No	sts in insurance policies ples: Health, disability, or I Name the insurance comp		-	HSA); credit, homeowr Beneficiar		nce Surrender or refund value:
If you somed	nterest in property that is are the beneficiary of a livi one has died. Give specific information.	ing trust, exped			currently entitled to rec	eive property because
Exam ■ No	s against third parties, was ples: Accidents, employment. Describe each claim	ent disputes, in			for payment	
■ No	contingent and unliquida Describe each claim		every nature, including	g counterclaims of th	e debtor and rights to	set off claims
■ No	nancial assets you did no	-				

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	Add the dollar value of all of your entries from Part 4, includin for Part 4. Write that number here			A.
				\$10,100.00
Part 5	: Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ate in Part 1.	
87. D o	you own or have any legal or equitable interest in any business-relate	ed property?		
1	No. Go to Part 6.			
	'es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	own or Have an Interes	st In.	
16. D	o you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
E	by you have other property of any kind you did not already list examples: Season tickets, country club membership No Yes. Give specific information	?		
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$12,700.00		
57.	Part 3: Total personal and household items, line 15	\$600.00		
58.	Part 4: Total financial assets, line 36	\$10,100.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$23,400.00	Copy personal property to	otal \$23,400.0 0

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$23,400.00

			Document	Ē	Page 15 of 47	_
Fill	in this inform	nation to identify your case:				
Del	otor 1	Denise Brown				
Dok	otor 2	First Name	Middle Name	L	Last Name	
	ouse if, filing)	First Name	Middle Name	l	Last Name	
Uni	ted States Ban	kruptcy Court for the: NO	RTHERN DISTRICT OF	ILLIN	OIS	
	se number					☐ Check if this is an amended filing
Of	ficial For	m 106C				
Sc	chedule	C: The Prope	erty You Cla	im	as Exempt	12/15
the p	property you lis	sted on Schedule A/B: Proper I attach to this page as many	rty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spec any iunc exer	cific dollar am applicable sta ds—may be ur mption to a pa	nount as exempt. Alternative atutory limit. Some exempti nlimited in dollar amount. H	ely, you may claim the f ons—such as those for lowever, if you claim an	ull fa heal exer	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Par	rt 1: Identify	y the Property You Claim as	s Exempt			
1.	Which set of	exemptions are you claimir	ng? Check one only, eve	n if yo	our spouse is filing with you.	
	You are cla	niming state and federal nonb	ankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are cla	niming federal exemptions. 1	1 U.S.C. § 522(b)(2)		• (), ()	
2			. , , ,	empt	fill in the information below	
	Brief description	ny property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below. escription of the property and line on Current value of the Amount of the exemption you claim portion you own				Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2010 Chevro	olet Equinox 13,000 mile	\$12,700.00		\$2,400.00	735 ILCS 5/12-1001(c)
	Line nom Scri	edule A/B. 3. i			100% of fair market value, up to any applicable statutory limit	
	-	earing apparel	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
	Line from Scn	edule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	•	to Debtor from	\$10,000.00		\$4,000.00	735 ILCS 5/12-1001(b)
	order. Ex-h security and amount to b	usband is on social d debtor believes this be uncollectable.			100% of fair market value, up to any applicable statutory limit	
3.		ning a homestead exemptio justment on 4/01/16 and ever			iled on or after the date of adjustme	nt.)
	☐ Yes. Did	you acquire the property cov	ered by the exemption wi	ithin 1	,215 days before you filed this case	?

No

Yes

				Filed 03/31/16		red 03/31/16 16:5 L6 of 47	59:27 Desc N	⁄lain
Fill ir	n this informat	ion to identify you	r case:					
Debto	or 1	Denise Brown						
	-	First Name	Mid	Idle Name	Last Name			
Debto (Spous	_	First Name	Mid	ldle Name	Last Name			
Unite	d States Bankr	ruptcy Court for the:	NORTH	IERN DISTRICT OF IL	LINOIS			
Case (if know	number						☐ Check	if this is an
							amen	ded filing
∩ffi,	cial Form 1	1060						
			Who F	Have Claims	Secure	ed by Property	,	12/15
Be as	complete and ac	ccurate as possible.	f two marrie	d people are filing togeth	her, both are	equally responsible for sup On the top of any addition	oplying correct informa	
. Do a	any creditors hav	ve claims secured by	your proper	rty?				
	No. Check th	is box and submit th	nis form to th	he court with your other	r schedules.	You have nothing else to	report on this form.	
	Yes. Fill in all	of the information	below.					
Part '	1: List All S	ecured Claims						
			nore than one	e secured claim, list the cre	editor senarate	Column A	Column B	Column C
for ea	ch claim. If more	than one creditor has	a particular o	claim, list the other creditor ording to the creditor's nan	rs in Part 2. As		Value of collateral that supports this claim	Unsecured portion If any
2.1	Carmax Auto	o Finance	Describe th	ne property that secures	the claim:	\$12,734.00	\$12,700.00	\$34.00
	Creditor's Name		2010 Che miles	evrolet Equinox 13,	000			
	Po Box 4406 Kennesaw, 6		As of the dapply.	ate you file, the claim is:	Check all that			
-	Number, Street, City	y, State & Zip Code	☐ Unliquid					
Who	owes the debt?	? Check one.	Disputed	d lien. Check all that apply.				
■ De	ebtor 1 only		☐ An agree	ement you made (such as	mortgage or s	secured		
	ebtor 2 only		car loar	n)				
	Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien)							
☐ At	If the debtors and another I suggest that the debtors are the debtors and another I suggest that the debtors are the debtors and the debtors and the debtors are							
	neck if this claim ommunity debt	relates to a	Other (in	ncluding a right to offset)	PMSI aut	o loan		
		Opened 2/01/14						
Date	debt was incurre	Last Active	Last	t 4 digits of account num	nber 9359)		

Add the dollar value of your entries in Column A on this page. Write that number here: \$12,734.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$12,734.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Ca	36 10-11223 L		Document	Page 1	7 of 17	.21 Des	oc mani
Filli	in this inform	nation to identify your		AACHIII C III	F AUL.	/ ()(4 /		
Deh	tor 1	Denise Brown						
DCD	tor r	First Name	Middle Na	ame	Last Name			
	tor 2							
(Spou	use if, filing)	First Name	Middle Na	ame	Last Name			
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN	DISTRICT OF ILL	LINOIS			
Case	e number							
(if kno	_			_			_ c	heck if this is an
							a	mended filing
∖tti	cial Form	106E/E						
		/F: Creditors W	/ho Have	Unsecured	Claims			12/15
						Part 2 for creditors with NON	IPRIORITY clair	
iched iched eft. A	dule G: Execut dule D: Credito attach the Cont	ory Contracts and Unexpors Who Have Claims Sec	ired Leases (Of ured by Proper	ficial Form 106G). D ty. If more space is	o not include needed, copy t	ontracts on Schedule A/B: I any creditors with partially s he Part you need, fill it out, do not file that Part. On the t	secured claims number the ent	that are listed in tries in the boxes on the
Part	1: List Al	l of Your PRIORITY Un	secured Clai	ms				
1. [Do any credito	rs have priority unsecure	d claims agains	st you?				
	No. Go to Pa	art 2.						
	Yes.							
Part		l of Your NONPRIORIT						
3. [Do any credito	rs have nonpriority unsec	cured claims ag	ainst you?				
[☐ No. You hav	re nothing to report in this p	art. Submit this f	orm to the court with	your other sche	edules.		
ı	Yes.							
t t	unsecured claim	n, list the creditor separately	y for each claim.	For each claim listed	I, identify what t	holds each claim. If a credit ype of claim it is. Do not list clause three nonpriority unsecured c	aims already inc	luded in Part 1. If more
	-							Total claim
4.1	Afni			Last 4 digits of acc	ount number	0945		\$311.00
	1310 Ma	Creditor's Name Irtin Luther King Dr Ington, IL 61701		When was the debt	incurred?	Opened 10/01/15		
		reet City State Zlp Code		As of the date you	file, the claim i	s: Check all that apply		
	Who incur	red the debt? Check one.						
	Debtor	1 only		☐ Contingent				
	☐ Debtor	2 only		☐ Unliquidated				
	☐ Debtor	1 and Debtor 2 only		☐ Disputed				
	☐ At least	one of the debtors and and	other	Type of NONPRIOR	RITY unsecured	I claim:		
		if this claim is for a comr	munity	☐ Student loans				
	debt	m subject to offset?		Obligations arising report as priority claim		ration agreement or divorce th	nat you did not	
	■ No					g plans, and other similar deb	ts	
	☐ Yes					Attorney At T U-Verse		
	_ 103			Other. Specify _				

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Case number (if know)

DCDIO	Dellise Brown		Case Hamber (II know)				
4.2	Cardiac Consulting Group, SC	Last 4 digits of account number		\$935.00			
	Nonpriority Creditor's Name Bankruptcy Dept 71 W 156th St, Suite 305	ankruptcy Dept When was the debt incurred? 1 W 156th St, Suite 305					
	Harvey, IL 60426 Number Street City State Zlp Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	no or the date you me, the slam					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Balance du	e for unpaid medical services				
4.3	Credit One Bank Na	Last 4 digits of account number	5557	\$694.00			
	Nonpriority Creditor's Name		Opened 1/05/10 Last Active				
	Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	11/11/12				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing					
	□ Yes	■ Other. Specify Credit Card					
	_ 103	Other. Specify					
4.4	Fingerhut	Last 4 digits of account number	4855	\$1,620.00			
	Nonpriority Creditor's Name 6250 Ridgewood Rd	When was the debt incurred?	Opened 11/01/14 Last Active 2/11/16				
	St Cloud, MN 56303 Number Street City State Zlp Code	As of the date you file, the claim	in Check all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim	іs: Спеск ан тасарріу				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes						
	— 103	■ Other. Specify Charge Account					

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Case number (if know)

DCDIO	Dellise Blowii		Case Harriber (II know)	
4.5	First Premier Bank	Last 4 digits of account number	0871	\$753.00
	Nonpriority Creditor's Name 601 S Minniapolis Ave Sioux Falls, SD 57104 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim i	Opened 12/01/15 Last Active 2/10/16 s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
4.6	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	2789	\$518.00
	601 S Minniapolis Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 11/01/14 Last Active 2/10/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.7	GLA Collection Company Nonpriority Creditor's Name	Last 4 digits of account number	4133	\$36.00
	Po Box 7728 Dept #2 Lousiville, KY 40257	When was the debt incurred?	Opened 9/01/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Collection A Other. Specify Consults-Ir	Attorney Rad Imag ng-Avoca	

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Case number (if know)

Debtor	Denise Brown		Case number (if know)			
4.8	IL Dept of Employment Security Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00		
	Benefit Payment Control Division PO Box 4385 Chicago, IL 60680	When was the debt incurred?				
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	,,			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	_	_ possible o	verpayment from several years			
	☐ Yes	Other. Specify ago				
4.9	Illinois Collection Se Nonpriority Creditor's Name	Last 4 digits of account number	6911	\$151.00		
	8231 185th St Ste 100	When was the debt incurred?	Opened 7/01/15			
	Tinley Park, IL 60487					
•	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims				
	No	☐ Debts to pension or profit-sharir				
	□ Yes	■ Other. Specify Collection				
		Other. Specify				
4.1	Merrick Bank/Geico Card	Last Adiates of account assumb	9094	\$565.00		
0	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ303.00		
	Po Box 23356		Opened 8/01/15 Last Active			
	Pittsburg, PA 15222	When was the debt incurred?	2/26/16			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharir				
	Yes	Other. Specify Credit Card	<u> </u>			

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Case number (if know)

Debtor	1 Denise Brown		Case number (if know)	
4.1	Midwest Emergency Associates	Last 4 digits of account number		\$957.00
	Nonpriority Creditor's Name Bankruptcy Department PO Box 5990	When was the debt incurred?		·
	Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Balance du	e for unpaid medical services	
4.1	National City Mortgage/PNC Mtg	Last 4 digits of account number	4073	\$163,357.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 3232 Newmark Dr. Miamisburg, OH 45342	When was the debt incurred?	Opened 2/01/07 Last Active 7/02/14	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	quit claime 158th, Sou Other. Specify pursuant to		
4.1	Palos Community Hospital	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Bankruptcy Department 12251 South 80th Ave Palos Heights, IL 60463	When was the debt incurred?		
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	Other Specify Balance du	e for unpaid medical services	

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Case number (if know)

DCDIC	Deffise brown	Odde Hamber (ii know)	
4.1 4	Seventh Avenue	Last 4 digits of account number 6570	\$326.70
	Nonpriority Creditor's Name Bankruptcy Department 1112 7th Avenue Monroe, WI 53566	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	
4.1	Tarant	2074	¢5 575 00
5	Target Nonpriority Creditor's Name	Last 4 digits of account number 3874	\$5,575.09
	c/o Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.1	US Cellular	Look A divite of cooperat records	\$0.00
6	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.00
	Bankruptcy Dept 8410 W. Bryn Mawr, Ste 700 Chicago, IL 60631-3486	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Balance due for unpaid services	

Debto	or 1 Denise Brown	Document F	Page 2	3 of 47 Case number (if know)	
4.1 7	Vision Financial Servi	Last 4 digits of accour	nt number	3774	\$575.00
	Nonpriority Creditor's Name 1900 W Severs Rd La Porte, IN 46350	When was the debt inc	curred?	Opened 10/01/15	<u> </u>
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file,	the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:	
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising o report as priority claims	ut of a sepa	ration agreement or divorce that you did no	ot
	■ No		profit-sharin	g plans, and other similar debts	
	□ Yes	·	llection	Attorney Ingalls Memorial	
Part :	3: List Others to Be Notified About a De	ebt That You Already Liste	ed		
is tr have	this page only if you have others to be notified rying to collect from you for a debt you owe to s e more than one creditor for any of the debts the ified for any debts in Parts 1 or 2, do not fill out	omeone else, list the original at you listed in Parts 1 or 2, li	creditor in	Parts 1 or 2, then list the collection age	ncy here. Similarly, if you
Name	and Address	On which entry in Part 1 or Pa	art 2 did you	list the original creditor?	
_	Recoveries	Line 4.2 of (Check one):		Part 1: Creditors with Priority Unsecured 0	
_	Box 926100 cross, GA 30010-6100			Part 2: Creditors with Nonpriority Unsecur	ed Claims
14010	51033, GA 30010-0100	Last 4 digits of account number	er		
Name	and Address	On which entry in Part 1 or Pa	art 2 did you	list the original creditor?	
AT&		Line 4.1 of (<i>Check one</i>):		Part 1: Creditors with Priority Unsecured (Claims
	kruptcy Dept			Part 2: Creditors with Nonpriority Unsecur	
_	Box 769			, ,	
Ariii	ngton, TX 76004	Last 4 digits of account number	er		
Name	and Address	On which entry in Part 1 or Pa	art 2 did you	list the original creditor?	
	& Gaines	Line 4.15 of (Check one):		Part 1: Creditors with Priority Unsecured (Claims
	W Glenn Ave			Part 2: Creditors with Nonpriority Unsecur	ed Claims
Whe	eling, IL 60090	Last 4 digits of account number	er	1213	
Name HHR	and Address	On which entry in Part 1 or Pa			
	kruptcy department	Line 4.11 of (<i>Check one</i>):		Part 1: Creditors with Priority Unsecured C	
	3ox 5406			Part 2: Creditors with Nonpriority Unsecur	ed Claims
Cinc	innati, OH 45273-7942	Last 4 digits of account number	≙r		
	and Address Christensen & Assoc, PC	On which entry in Part 1 or Pa Line 4.3 of (<i>Check one</i>):		list the original creditor? Part 1: Creditors with Priority Unsecured (Claima
	kruptcy Department	Ellie 410 of (officer offe).		Part 2: Creditors with Nonpriority Unsecur	
_	3ox 519			Part 2. Creditors with Nonphority Onsecur	eu Ciairis
Saul	k Rapids, MN 56379	Last 4 digits of account number	er	2432	
Namo	and Address	On which entry in Part 1 or Pa	art 2 did vou	list the original creditor?	
_	thwest Credit	Line 4.1 of (<i>Check one</i>):	-	Part 1: Creditors with Priority Unsecured (Claims
	International Pkwy Suite 1100			Part 2: Creditors with Nonpriority Unsecur	
Carr	ollton, TX 75007-1958	Last 4 digits of account number		. , . ,	
		-aut i digito di doodulit lidilibi			

Name and Address Weltman, Weinberg & Reis Co., L.P.A

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):

□ Part 1: Creditors with Priority Unsecured Claims■ Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 **Denise Brown**

Case number (if know)

Bankruptcy Department 323 W Lakeside Ave, Ste 200 Cleveland, OH 44113-1009

Last 4 digits of account number

Name and Address
Weltman, Weinberg & Reis Co.,
L.P.A
Bankruptcy Department
323 W Lakeside Ave, Ste 200
Cleveland, OH 44113-1009

On which entry in Part 1 or Part 2 did you list the original creditor?

Line <u>4.15</u> of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.		6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 176,373.79
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 176,373.79

		12(1)	111111111111111111111111111111111111					
Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Denise Brown							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS					
Case number								
(if known)				☐ Check if this				
				amended fil				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Documen	t Page 26 of 47	
Fill in this info	rmation to identify your	case:		
Debtor 1	Denise Brown			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official F	orm 106H			
	e H: Your Cod	ebtors		12/15
ill it out, and n your name and 1. Do you	umber the entries in the case number (if known)	boxes on the left. Attach t Answer every question.		e space is needed, copy the Additional Page, e. On the top of any Additional Pages, write tor.
□ No				
Yes				
			perty state or territory? (Commuto Rico, Texas, Washington, and	unity property states and territories include Wisconsin.)
■ No. Go t	to line 3.			
☐ Yes. Dic	I your spouse, former spou	use, or legal equivalent live v	vith you at the time?	
in line 2 aç	gain as a codebtor only i D), Schedule E/F (Official	f that person is a guaranto	r or cosigner. Make sure you ha	ouse is filing with you. List the person shown ave listed the creditor on Schedule D (Official chedule D, Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and Z	P Code		n 2: The creditor to whom you owe the debt all schedules that apply:
615	l Brown E 158th Ave th Holland, IL 60473		■ Sch □ Sch	nedule D, line nedule E/F, line <u>4.12</u> nedule G nal City Mortgage/PNC Mtg

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Fill	in this information to	identify your ca	ase:								
	otor 1	Denise Brow									
	otor 2 ouse, if filing)										
Uni	ted States Bankrupte	cy Court for the	NORTHERN DISTRIC	CT OF ILLINOIS							
	se number nown)			-					ed filing ent showin	g postpetition	
0	fficial Form	<u> 1061</u>					Ī	/IM / DD/ \	YYYY		
S	chedule I: \	our Inco	ome								12/15
spo atta	use. If you are sepa ch a separate shee	arated and you t to this form. (Employment	are married and not filir r spouse is not filing w On the top of any additi	ith you, do not inclu	ude infor	mati	on abou	t your spo umber (if	ouse. If mo known). A	ore space is	needed,
	If you have more the	han one ioh		■ Employed				☐ Empl		9 -p	
	attach a separate prinformation about a employers.	page with	Employment status	☐ Not employed				•	mployed		
			Occupation	home care prov	vider						
	Include part-time, s self-employed wor		Employer's name	Addus Homeca	are						
	Occupation may in or homemaker, if it		Employer's address	2300 Warrenvil Downers Grove		515					
			How long employed t	here? 4 years	s			_			
Par	t 2: Give Deta	ails About Mon	thly Income								
spou	use unless you are s	eparated.	ate you file this form. If	,	·	·	•		·	•	J
-	u or your non-filing s e space, attach a se	•	ore than one employer, co this form.	ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
							For De	btor 1		btor 2 or ing spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	2	2,741.09	\$	N/A	
3.	Estimate and list	monthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross li	ncome. Add lin	ne 2 + line 3.		4.	\$	2,7	41.09	\$	N/A	

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Copy line 4 here 4. Sport 1 For Debtor 1 Sport 2 or non-filling spouse 5 N/A 5. List all payroll deductions: 5. Tax, Medicare, and Social Security deductions 5. Sa. \$ 458.16 \$ N/A 5. Mandatory contributions for retirement plans 5. \$ 0.00 \$ N/A 5. Mandatory contributions for retirement plans 5. \$ 0.00 \$ N/A 5. Required repayments of retirement fland loans 5. \$ 0.00 \$ N/A 5. Required repayments of retirement fland loans 5. \$ 0.00 \$ N/A 5. Insurance 5. \$ 0.00 \$ N/A 5. Union duse 5. \$ 0.00 \$ N/A 5. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,206.60 \$ N/A 5. List all other income regularly received: 8. Net income from entall property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8. Family support payments that you, a non-filling spouse, or a dependent regularly receive include aimmon, spousal support, child support, maintenance, divorce settlement, and property settlement. 8. Social Security 8. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps, benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8. Specify retirement income 8. Other powernment assistance had power or housing subsidies. 8. Specify and the program or housing subsidies. 8. Specify and the program or housing subsidies. 8. Specify and the program or housing subsidies. 8. Denot	Copy line 4 here 4. \$ 2,741.09 \$ N/A 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions. Specify: 5c. Voluntary of the deductions 5c. Vo	Deb	tor 1	Denise Brown	_	Case i	number (<i>if known</i>)			
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_			.							
	Ш теs. Explain.			Yes. Explain:						

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						ı				
Fill	in this information t	to identify yo	ur case:							
Deb	otor 1 De	nise Brow	'n			Ch	eck if this	is:		
					_		An ame	nded filing		
Deb	tor 2								wing postpetition chapter	
(Spo	ouse, if filing)						13 expe	enses as of	the following date:	
Unit	ed States Bankruptcy	Court for the:	NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DI	O / YYYY		
Cas	e number									
(If kı	nown)									
Of	fficial Form	106J								
Sc	chedule J:	Your F	Exper	ISES					12	/15
				If two married people ar	e filing together be	oth are en	ıııally resi	nonsible fo		-
info		space is nee	eded, atta	ch another sheet to this						
Par	t 1: Describe	Your House	hold							
1.	Is this a joint ca									
	■ No. Go to line	2								
	☐ Yes. Does De		n a separ	ate household?						
	□ No									
		Ahtor 2 mus	t file Offici	al Form 106J-2, <i>Expenses</i>	for Senarate House	ahold of De	ahtor 2			
	1 103. D	CDIOI Z IIIus	t ilic Offici	arr omi 1000 2, <i>Expenses</i>	Tor Ocparate Floase	mola of Bo	DIOI 2.			
2.	Do you have de	pendents?	■ No							
	Do not list Debtor Debtor 2.	1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dep age	endent's	Does dependent live with you?	
	Do not state the								□ No	
	dependents name	es.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
_	_								☐ Yes	
3.	Do your expense expenses of peo		nan 🔳	No						
	yourself and you			Yes						
				_						
				y Expenses uptcy filing date unless y	ou are using this fo	orm 00 0 1	nunnlama	nt in a Cha	ontor 12 ages to report	
exp				y is filed. If this is a supp						
Incl	lude expenses na	id for with r	on-cash	government assistance i	f vou know					
				cluded it on Schedule I: \				.,		
(Off	ficial Form 106l.)							Your exp	enses	
4.				ses for your residence. I	nclude first mortgage	e 4.	\$		767.00	
	payments and an	iy renit ior tine	e ground o	i iot.			–			
	If not included in	n line 4:								
	4a. Real estate					4a.	· —		0.00	
				's insurance		4b.	: —		0.00	
				ipkeep expenses		4c.			0.00	
5.				dominium dues our residence, such as ho	mo oquity loops	4d. 5.			0.00	
J.	Auditional mort	yaye payille	into iui yt	our residence, such as no	me equity loans	ე.	φ		0.00	

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Debtor '	1 Denise	Brown	Case num	ber (if known)	
6. Uti	ilities:				
6a		y, heat, natural gas	6a.	\$	125.00
6b		ewer, garbage collection	6b.	\$	0.00
6c.		ne, cell phone, Internet, satellite, and cable services	6c.	·	50.00
6d			6d.	·	0.00
		sekeeping supplies	7.		350.00
		children's education costs	7. 8.	\$	
_			o. 9.	·	0.00
	-	dry, and dry cleaning		\$	100.00
		products and services	10.	·	25.00
		ental expenses	11.	\$	40.00
		n. Include gas, maintenance, bus or train fare.	12.	\$	250.00
		car payments.	13.	·	
		t, clubs, recreation, newspapers, magazines, and books		· -	0.00
		ntributions and religious donations	14.	\$	50.00
	surance.	in a company of a district of frame constraints and a district of the configuration of the co			
		insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	a. Life insu		15a.	•	0.00
_	b. Health ir		15b.	·	0.00
	c. Vehicle i		15c.		123.00
		surance. Specify:	15d.	\$	0.00
_		include taxes deducted from your pay or included in lines 4 or 20.		_	
	ecify:		16.	\$	0.00
		lease payments:			
		ments for Vehicle 1	17a.	\$	325.00
17	b. Car payr	ments for Vehicle 2	17b.	\$	0.00
17	c. Other. S	pecify:	17c.	\$	0.00
17	d. Other. S	pecify:	17d.	\$	0.00
3. Yo	ur payment	s of alimony, maintenance, and support that you did not report as		-	
de	ducted fron	n your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. Ot	her paymen	its you make to support others who do not live with you.		\$	0.00
Sp	ecify:		19.		
		perty expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
20	a. Mortgag	es on other property	20a.	\$	0.00
20	b. Real est	ate taxes	20b.	\$	0.00
20	c. Property	, homeowner's, or renter's insurance	20c.	\$	0.00
		ance, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.	·	0.00
_	her: Specify		21.	·	0.00
. 01	ner. Specily			- φ	0.00
2. C a	lculate you	r monthly expenses			
22	a. Add lines	4 through 21.		\$	2,205.00
22	b. Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		2a and 22b. The result is your monthly expenses.		\$	2 205 00
22	o. Aud IIIIe Z	za ana zzb. The result is your monthly expenses.		Ψ	2,205.00
3. C a	lculate you	r monthly net income.			
	-	e 12 (your combined monthly income) from Schedule I.	23a.	\$	2,206.60
		ur monthly expenses from line 22c above.	23b.		2,205.00
_0	Jop, 90		200.		2,203.00
23	c Subtract	your monthly expenses from your monthly income.			
20		Ilt is your <i>monthly net income</i> .	23c.	\$	1.60
				<u> </u>	
4. D o	you expec	t an increase or decrease in your expenses within the year after yo	ou file this	form?	
Foi	r example, do	you expect to finish paying for your car loan within the year or do you expect you			e or decrease because o
		e terms of your mortgage?			
	No.				
	Yes.	Explain here:			
	. 00.				

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Fill in this inforr	nation to identify your	case:			
Debtor 1	Denise Brown				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Forn Declarat		ın Individual	Debtor's Scl	hedules	12/15
You must file this obtaining money years, or both. 18	s form whenever you fi	n connection with a bank	or amended schedules.	Making a false stateme	nt, concealing property, or or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attorn	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes. N	Name of person				tcy Petition Preparer's Notice, d Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sumr	mary and schedules filed	with this declaration a	nd
X /s/ Den	ise Brown		X		
	Brown		Signature of D	Debtor 2	

Date

Signature of Debtor 1

Date March 22, 2016

-	II in this inform	action to identify you				
		nation to identify you	r case.			
De	ebtor 1	Denise Brown First Name	Middle Name	Last Name		
1 1	ebtor 2					
(Sp	oouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS		
	ase number					
(if F	known)					Check if this is an amended filing
						amended ming
\sim	fficial Fa	107				
	fficial For		Accessor Complemental	larata Ellina (a.a.)	D 1 (
			Affairs for Individ			12/1
			ible. If two married people a attach a separate sheet to t			
		n). Answer every que		он шолор он ш	, aaaa. pagee,e ,	
Pa	art 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
•	_	our one maritar otati				
	■ Married					
	☐ Not mar	riea				
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
	Yes. List	t all of the places you	ived in the last 3 years. Do no	t include where you live no	DW.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	Address:	Dates Debtor 2 lived there
	615 E 158t South Holl	h St and, IL 60473	From-To: from 2001 unt i 2014	☐ Same as Debto	r1	☐ Same as Debtor 1 From-To:
	3700 W 13		From-To: 2014 -March 2	☐ Same as Debto	r 1	☐ Same as Debtor 1
	PO Box 10 Robbins, II		2014 - Iviai Cii 2	015		From-To:
3. sta			ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev			
	.					
	■ No □ Yes Ma	ke sure vou fill out <i>Sc</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
		no ouro you mi our oor	Todal of the Todal	notar i omi roorij.		
Pa	ert 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	II businesses, including pa	rt-time activities.	lendar years?
	ıı you are illifi	y a joint case and you	nave income that you receive	together, list it only office	under Debitor I.	
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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Case number (if known) Document

Debtor 1 Denise Brown

				Debtor 1				De	btor 2		
					of income that apply.	(be	oss income fore deductions and clusions)		ources of ind neck all that a		Gross income (before deductions and exclusions)
		1 of currer iled for ban	nt year until kruptcy:	■ Wages	, commissions, ips		\$5,696.62		Wages, con nuses, tips	nmissions,	
				☐ Operat	ing a business				Operating a	business	
	last calen nuary 1 to	dar year: December	31, 2015)	■ Wages	, commissions, ips		\$28,481.00		Wages, con nuses, tips	nmissions,	
				☐ Operat	ing a business				Operating a	business	
		dar year bet December		■ Wages	, commissions, ips		\$27,049.00		Wages, con nuses, tips	nmissions,	
				☐ Operat	ing a business				Operating a	business	
	winnings. List each s	lf you are fili	ng a joint cas	e and you h	ave income that	you red	o not include income	only o	nce under D	ebtor 1.	nd gambling and lottery
				Debtor 1				D	btor 2		
				Sources of Describe b		(be	oss income fore deductions and clusions)	Sc	ources of inc escribe below		Gross income (before deductions and exclusions)
Par	t 3: List	Certain Pa	vments You	Made Befo	re You Filed for	Bankr	uptcv				
6.	Are eithei	Neither Deindividual p	ebtor 1 nor Dorimarily for a 90 days befo	ebtor 2 has personal, fa re you filed	amily, or househo	umer o	lebts. Consumer deb				01(8) as "incurred by an
			paid that cre not include	each credito editor. Do no payments to	ot include paymei o an attorney for t	nts for his bar	• • • • • • • • • • • • • • • • • • • •	ligation	s, such as cl	nild support a	and alimony. Also, do
	Yes.				primarily consu for bankruptcy, d		lebts. pay any creditor a tot	tal of \$	600 or more	?	
		■ No.	Go to line 7								
		□ Yes		ments for do	mestic support o		al of \$600 or more ar ons, such as child su				nt creditor. Do not include payments to an
	Creditor'	s Name and	d Address		Dates of payme	ent	Total amount paid	Ar	nount you still owe	Was this	payment for

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Case number (if known) Document Debtor 1 Denise Brown

7.	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1° alimony.	rtners; relatives of any gen- control, or owner of 20% or	eral partners; partner r more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one fo
	■ No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	No No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	s. and Foreclosures				
·-	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below. ■ No □ Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	I			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan a No Yes. Fill in the details.		uding a bank or fii	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes List Certain Gifts and Contributions		rty in the possess	ion of an assigne	e for the bene	efit of creditors, a
	t 5: List Certain Gifts and Contributions Within 2 years before you filed for bankrup	toy did you give any gifts	with a total value	of more than 600	0 nor noros=1	
13.	No	tcy, did you give any gifts	s with a total value	of more than \$60	u per person	?
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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14.	Within 2 years before you filed for bank ■ No			ns with a total	I value of more than	\$600 to any charity
	☐ Yes. Fill in the details for each gift or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Contributions)	total	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankr or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anytl	hing because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and	Describ	be any insurance coverage for the lo	oss	Date of your	Value of property
	how the loss occurred		the amount that insurance has paid. L ce claims on line 33 of Schedule A/B:		loss	lost
Par	t 7: List Certain Payments or Transfer			,, ,		
	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Law Office of Thomas W. Lynch, P 9231 S. Roberts Road Hickory Hills, IL 60457 twlpc@att.net	preparers You		erty nt of	Date payment or transfer was made various dates	Amount of payment \$1,132.00
17.	Within 1 year before you filed for bankr promised to help you deal with your cre Do not include any payment or transfer tha	editors or	to make payments to your creditor		r transfer any prope	erty to anyone who
	■ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	our busine rs made a	ess or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you			Pa. 3 III 0A	9+	

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Case number (if known) Document Debtor 1 Denise Brown

	Person Who Received Transfer Address		Description and property transfe		pay	cribe any property or ments received or debts I in exchange	Date transfer was made
	Person's relationship to you						
	Paul Brown		pursuant to di				February 9,
	615 E 158th Ave		Debtor quit cla		'		2016
	South Holland, IL 60473		located at 615				
	ex-husband		South Holland				
	ex-nuspand		estimated valu Zillow: \$120,00 PNC mortgage	0.00, owe	•		
	Carmax		2000 Chevrole	t Silverado		eived \$1000.00 used pay rent	September 2015
	unrelated						
	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details. Name of trust						Date Transfer was
							made
Par 20.	List of Certain Financial Accounts, Institute Within 1 year before you filed for bankruptc sold, moved, or transferred?		•	•			your benefit, closed,
	Include checking, savings, money market, chouses, pension funds, cooperatives, associ					sit; shares in banks, cred	lit unions, brokerage
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		st 4 digits of count number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	MB Financial Bank	хх	XX-	■ Checking		joint account w/	\$0.00
				☐ Savings ☐ Money Mai ☐ Brokerage ☐ Other	ket	ex-husband, closed because of separation	•
	TCF Bank	XX	XX-	■ Checking □ Savings		2014, closed because of to bank fees	\$0.00
				☐ Money Mai ☐ Brokerage ☐ Other	ket	bally lees	
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year	before you filed fo	or bankruptcy, a	ny safe d	eposit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.						
			M/h a alas had	4- '40	Dec :::"	- the	Da 115 - 1111
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describ	e the contents	Do you still have it?

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22.	Have you stored property in a s	torage unit or pla	ace other than your home within 1	year l	pefore you filed for bankruptcy				
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State a	and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Desc	ribe the contents	Do you still have it?			
Par	rt 9: Identify Property You Hol	d or Control for S	Someone Else						
23.	Do you hold or control any profor someone.	perty that someor	ne else owns? Include any proper	ty you	borrowed from, are storing fo	r, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Code) Describe the property								
Par	rt 10: Give Details About Enviro	onmental Informa	ation						
For	the purpose of Part 10, the follo	wing definitions a	apply:						
•	toxic substances, wastes, or m regulations controlling the clea Site means any location, facility	aterial into the air nup of these sub y, or property as o	defined under any environmental	dwater	, or other medium, including s	tatutes or			
	-	thing an environn	mental law defines as a hazardous	waste	e, hazardous substance, toxic	substance,			
D	hazardous material, pollutant, o	•		. 41	· · · · · · · ·				
•	•		u know about, regardless of wher may be liable or potentially liable	-		ental law?			
	■ No	nou you mat you	That is name of potentially habit	unao		ontarian i			
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State a	and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nvironmental law, if you now it	Date of notice			
25.	Have you notified any governm	ental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State a	and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nvironmental law, if you now it	Date of notice			
26.	Have you been a party in any ju	dicial or adminis	trative proceeding under any envi	ronme	ental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.								
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	re of the case	Status of the case			
Par	rt 11: Give Details About Your I	Business or Conr	nections to Any Business						
27.	Within 4 years before you filed	for bankruptcy, d	lid you own a business or have ar	y of th	e following connections to an	y business?			
	• •		rade, profession, or other activity,		•				
		ability company	(LLC) or limited liability partnersh	ip (LLI	P)				

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Case number (if known) Document Debtor 1 **Denise Brown** ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Denise Brown Signature of Debtor 2 **Denise Brown** Signature of Debtor 1 **Date**

Date March 22, 2016

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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FIII In this infor	mation to identify your	case:		
Debtor 1	Denise Brown First Name	Middle None	Look Nome	_
Debtor 2	riist name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	-
United States Ba	ankruptcy Court for the:	NORTHERN DIST	TRICT OF ILLINOIS	
C				-
Case number (if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Statemer	nt of Intentio	n tor indiv	<u>riduals Filing Under Cha</u>	pter / 12/15
16	to determine the control of the cont		Land this fam. If	
	ividual filing under cha	. ,,	out this form it:	
_	e claims secured by yo		at avairad	
	sed personal property a is form with the court w		ot expired. you file your bankruptcy petition or by the da	ate set for the meeting of creditors.
whiche	ever is earlier, unless th		e time for cause. You must also send copies	
on the	form			
	eople are filing together nd date the form.	r in a joint case, bo	th are equally responsible for supplying corr	ect information. Both debtors must
Re as complete	and accurate as nossih	ole If more snace is	needed, attach a separate sheet to this form	On the top of any additional pages
	our name and case nur		s needed, attach a separate sheet to this form	. On the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
•	•	art 1 of Schedule D	: Creditors Who Have Claims Secured by Pro	perty (Official Form 106D), fill in the
information be	elow. editor and the property t	hat is collateral	What do you intend to do with the property	y that Did you claim the property
identity the or	canor and mo property t	nat io conditional	secures a debt?	as exempt on Schedule C?
Creditor's C	Carmax Auto Finance	•	Currender the preparty	□No
name:	Darmax Auto i mance	,	☐ Surrender the property.☐ Retain the property and redeem it.	□ No
			Retain the property and enter into a	■ Yes
Description of	2010 Chevrolet Eq	uinox 13,000	Reaffirmation Agreement.	
property	miles		☐ Retain the property and [explain]:	
securing debt:				
Part 2: List Y	our Unexpired Persona	I Property Leases		
			in Schedule G: Executory Contracts and Une	expired Leases (Official Form 106G), fill
			expired leases are leases that are still in effe	
You may assume	e an unexpired persona	ii property lease if t	the trustee does not assume it. 11 U.S.C. § 36	ι5(p)(2).
Describe your u	unexpired personal prop	perty leases		Will the lease be assumed?
				_
Lessor's name: Description of lea	ased			□ No
Property:	aseu			☐ Yes
				55
Lessor's name:				□ No
Description of lea	ased			
Property:				☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Denise Brown	Case number (if known)	
Des	scription	n of leased		
	perty:	. 6. 164664	☐ Yes	
Lessor's name: Description of leased Property:			□ No	
		Torreased	□ Yes	
	sor's n		□ No	
Description of leased Property:		n or leased	☐ Yes	
Lessor's name: Description of leased Property:		*******	□ No	
		Torleased	☐ Yes	
	sor's n		□ No	
	perty:	n of leased	☐ Yes	
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indinated in the same indinated is subject to an unexpired lease.	cated my intention about any property of my estate that secures a d	ebt and any personal
Χ	/s/ D	enise Brown	X	
		se Brown	Signature of Debtor 2	
	Signa	ature of Debtor 1		
	Date	March 22, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-11229 Doc 1 Filed 03/31/16 Entered 03/31/16 16:59:27 Desc Main Document Page 45 of 47

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Denise Brown		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMI	PENSATION OF ATTOR	RNEY FOR DE	CBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the per rendered on behalf of the debtor(s) in contemplation	filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,132.00
	Prior to the filing of this statement I have receive	ved	\$	1,132.00
	Balance Due		\$	0.00
2. \$	335.00 of the filing fee has been paid.			
3. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed co	ompensation with any other person	unless they are meml	pers and associates of my law firm.
[☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the			
6. I	In return for the above-disclosed fee, I have agreed	to render legal service for all aspects	s of the bankruptcy c	ase, including:
b c	 Analysis of the debtor's financial situation, and representation and filing of any petition, schedules, Representation of the debtor at the meeting of creditions. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applications. 522(f)(2)(A) for avoidance of liens on 	statement of affairs and plan which editors and confirmation hearing, an to reduce to market value; exe ations as needed; preparation	may be required; ad any adjourned hear emption planning;	rings thereof;
7. E	By agreement with the debtor(s), the above-disclose Representation of the debtors in any any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of ankruptcy proceeding.	f any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Ma	arch 22, 2016	/s/ Thomas W. Ly	nch	
	ate	Thomas W. Lynch	h 6194247	
		Signature of Attorne Law Office of Tho		C.
		9231 S. Roberts F	Road	- .
		Hickory Hills, IL 6 (708) 598-5999 F		•
		twlpc@att.net	ax. (100) 530-0298	•
		Name of law firm		

United States Bankruptcy Court Northern District of Illinois

In re	Denise Brown		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	25
	The above-named Debtor(s (our) knowledge.	e) hereby verifies that the list of credi	tors is true and correct to	the best of my

Case 16-11229 Doc 1 Afni 1310 Martin Luther King Dr Bloomington, IL 61701

File 03/31/16 Entered 03/31/16 16:59:27wespessed Main banksumentepartmage 47 of 47 PO Box 5406 Cincinnati, OH 45273-7942

4120 International Pkwy Suite 1100 Carrollton, TX 75007-1958

AMO Recoveries PO Box 926100 Norcross, GA 30010-6100

IL Dept of Employment Security Benefit Payment Control Division PO Box 4385 Chicago, IL 60680

Target c/o Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440

AT&T Bankruptcy Dept PO Box 769 Arlington, TX 76004 Illinois Collection Se 8231 185th St Ste 100 Tinley Park, IL 60487

US Cellular Bankruptcy Dept 8410 W. Bryn Mawr, Ste 700 Chicago, IL 60631-3486

Blitt & Gaines 661 W Glenn Ave Wheeling, IL 60090 JC Christensen & Assoc, PC Bankruptcy Department PO Box 519 Sauk Rapids, MN 56379

Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350

Cardiac Consulting Group, SC Bankruptcy Dept 71 W 156th St, Suite 305 Harvey, IL 60426

Merrick Bank/Geico Card Po Box 23356 Pittsburg, PA 15222

Weltman, Weinberg & Reis Co., L. Bankruptcy Department 323 W Lakeside Ave, Ste 200 Cleveland, OH 44113-1009

Carmax Auto Finance Po Box 440609 Kennesaw, GA 30160

Midwest Emergency Associates Bankruptcy Department PO Box 5990 Carol Stream, IL 60197

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

National City Mortgage/PNC Mtg Attn: Bankruptcy Department 3232 Newmark Dr. Miamisburg, OH 45342

Fingerhut 6250 Ridgewood Rd St Cloud, MN 56303

Palos Community Hospital Bankruptcy Department 12251 South 80th Ave Palos Heights, IL 60463

First Premier Bank 601 S Minniapolis Ave Sioux Falls, SD 57104

Paul Brown 615 E 158th Ave South Holland, IL 60473

GLA Collection Company Po Box 7728 Dept #2 Lousiville, KY 40257

Seventh Avenue Bankruptcy Department 1112 7th Avenue Monroe, WI 53566